

(1) Person Filing: _____
Street Address: _____
City, State, Zip Code: _____
Phone Number: _____
Representing Self _____

SUPERIOR COURT OF ARIZONA, COUNTY OF COCONINO

(2) Petitioner: _____ Case Number: DO _____

AFFIDAVIT OF DELIVERY

Respondent: _____

(3) I am the ☐ Petitioner or ☐ Respondent.

(4) On this date: _____, I mailed or hand-delivered the following forms
signed by the court:

1. _____ 3. _____
2. _____ 4. _____

to the other party/the other party's attorney at this address:

(5) **Certificate of Service:** I will ☐ mail or ☐ hand-deliver a copy of this document to the other party on
the day I file it.

(6) I have read this Affidavit. It is true and complete to the best of my knowledge.

Signature: _____

State of Arizona)
)
County of _____)

Subscribed and sworn before me this date: _____ by: _____

Seal:

Notary Public: _____

Notary Expiration Date: _____